

OFFICIAL FILE

FORMAL COMPLAINT

ORIGINAL.

ILLINOIS COMMERCE COMMISSION

Illinois Commerce Commission
527 East Capitol Avenue
Post Office Box 19280
Springfield, Illinois 62794-9280

CHIEF CLERK'S OFFICE
Mar 6 11:30 AM '00
COMMERCE COMMISSION
ILLINOIS
For Commission Use Only:

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MAR 06 2000

ILLINOIS COMMERCE COMMISSION
CONSUMER AFFAIRS DIVISION
SPRINGFIELD OFFICE

Regarding a complaint

by STEPHEN L. HARR
(Person making the complaint)

against ILLINOIS POWER COMPANY
(Utility name)

as to REVENUE ADJUSTMENT CHARGES

in CHAMPAIGN Illinois.
(Reason for complaint)

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is 1602 A COUNTY ROAD 200N VILLA GROVE IL. 61956

The service address that I am complaining about is 3006 RESEARCH ROAD
CHAMPAIGN IL. 61821

My home telephone number is 217, 832 - 9681

Between 8:30 a.m. and 5:00 p.m. weekdays I can be reached at 417, 93 - 6

ILLINOIS POWER COMPANY (respondent) is a public utility and is subject to the provisions of
(Full name of utility company)
the Illinois Public Utilities Act.

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs which you think are involved with your complaint

83 IL. ADMINISTRATIVE CODE PART 280

Have you **contacted** the Consumer Affairs **Division** of the Illinois Commerce Commission about this complaint? ☒ Yes ☐ No

Has your complaint filed with that office **been** closed? ☒ Yes ☐ No

Please state your complaint briefly. Number each of the paragraphs. Please include any specific time period and dollar amounts involved with your complaint Use an extra sheet of paper, if needed.

PLEASE SEE ATTACHED PAGE ARTICLE #1

Please clearly state what you want the Commission to do in this case.

PLEASE SEE ATTACHED PAGE ARTICLE #2

Date: MARCH 4 2000

(Month, day, and year)

Complainant's signature

Stephen L. Happ

If you will be represented by an attorney, please give the attorney's name, address, and telephone number.

You need to file the original and three copies of this form with the Commission and also provide the Commission one copy for each utility complained about (referred to as respondents).

VERIFICATION

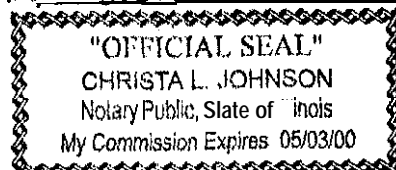
A notary public must watch you fill out this part of the form.

I, STEPHEN L. HAPP, first being duly sworn, say that I have read the above petition and know what it says. The contents of this petition are true to the best of my knowledge.

Stephen L. Happ
(Signature)

Subscribed and sworn/affirmed to before me this 4 day of March, 2000

Christa L. Johnson
Notary Public, Illinois



NOTE:

Failure to answer all of the questions on this form may result in this form being returned to you without processing. If you have questions, please call the counselor in the Consumer Affairs Division that handled your informal complaint.

cc207/07

Article #1

1. In June 1999 at my request, Illinois Power Co. disconnected electric and gas service to units #7 and #8 at 3000 Research Rd. Because these rentals were vacant at the time, I assumed turning off the utilities would save some expense.

2. During December, 1999 because of upcoming cold temperatures, I had the services restored. When I recieved the first bill there were of course usage and reconnection charges which were correct There was also a Revenue Adjustment Charge of \$595.68~ for these units.

3. I was not informed at either disconnection or reconnection of services about this substantial charge and was unaware of this policy.

Article #2

That Illinois Power Co. be required to notify customers at time of request for disconnection of services, about this policy of Revenue Adjustment, so they can make an informed decision to continue service or not. That I not be held responsible for this charge, because I learned about this policy after it was to late.